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- 1. A therapeutic agent for treatment of acute lung injury resulting from indirect causes comprising anti-IL-8 antibody as an active ingredient.
- 2. The therapeutic agent according to claim in which the acute lung injury is acute respiratory distress syndrome.
- 3. The therapeutic agent according to claim 1 in which the acute lung injury is adult respiratory distress syndrome.
- 4. The therapeutic agent according to any of claims 1, 2, and 3, in which the indirect cause is the sepsis syndrome.
- 5. The therapeutic agent according to any of claims 1, 2, and 3, in which the indirect cause is severe nonthoracic trauma.
- 6. The therapeutic agent according to any of claims 1, 2, and 3, in which the indirect cause is hypertransfusion during emergency resuscitation.
- 7. The therapeut agent according to any of claims 1, 2, and 3, in which the indirect cause is artificial cardiopulmonary bypass surgery.
- 8. The therapeutic agent according to any of claims 1 through 7, in which the anti-IL-8 antibody is a monoclonal antibody.
- 9. The therapeutic agent according to any of claims 1 through 6, in which the anti-IL-8 antibody is an antibody against mammalian IL-8.
- 10. The therapeutic agent according to any ofclaims 1 through 9, in which the anti-IL-8 antibody is an antibody against human IL-8.
- 11. The therapeutic agent according to any of claims 1 through 10; in which the anti-IL-8 antibody is WS-4 antibody.
- 12. The therapeutic agent according to any ofclaims 1 through 11, in which the anti-IL-8 antibody has the constant region of human antibody.

The therapeutic agent according to any of claims 1 through 12, in which the anti-IL-8 antibody is a humanized or chimeric antibody.

- The therapeutic agent according to -claims 1 through 15, in which the anti-IL-8 antibody is a humanized WS-4 antibedy.
- A therapeutic agent for hypoxemia in acute lung injury resulting from indirect causes comprising anti-IL-8 antibody as an active ingredient.
- Use of anti-VL-8 antibody for production of a therapeutic agent for theatment of acute lung injury resulting from indirect causes.
- 17. Use according to claim 16 in which the acute lung injury is acute respiratory distress syndrome.
- 18. Use according to claim 16 in which the acute lung injury is adult respiratory distress syndrome.
- A process 19. Use according to any of claims 16, 17, and 18, in which the indirect cause is the sepsis syndrome.
- 20. Use according to any of claims 16, 17, and 18, in which the indirect cause is severe nonthoracic trauma.
- torcess to any of claims 16, 17, and 18, in which the ipdirect cause is hypertransfusion during emergency resuscitation.
- Use according to any of claims 16, 17, and 18, in which the indirect cause is an artificial cardiopulmonary bypass surgery.
- Use according to any of claims 26 through 22, in which the anti-IL-8 \antibody is a monoclonal antibody.
- Use according to any of claims 16 through 23, in which the anti-IL-8 antibody is an antibody against mammalian IL-8.
- Use according to any of claims 16-through 24, in which the anti-IL-8 antibody is an antibody against human IL-8.
- Use according to any of claims 16 through 25, in which the anti-IL-8 antibody \s WS-4 antibody.
 - 27. Use according to any of claims 16 through 26,

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in which the anti-IL-8 antibody has the constant region of human antibody.

- 28. Use according to any of claims 16 through 27, in which the anti-IL-8 antibody is a humanized or chimeric antibody.
- 29. Use according to any of claims 16 through 28, in which the anti-IL-8 antibody is a humanized WS-4 antibody.
- 30. Use of anti-IL-8 antibody for production of a therapeutic agent for hypogemia in acute lung injury resulting from indirect causes.
- 31. A therapeutic method for treatment of acute lung injury resulting from indirect causes, which method comprises administering anti-IL-8 antibody to a subject in need of said therapy.
- 32. The method according to claim 31 in which the acute lung injury is agute respiratory distress syndrome.
- 33. The method according to claim 31 in which the acute lung injury is adult respiratory distress syndrome.
- 34. The method according to any of claims 31, 32, and 33, in which the indirect cause is the sepsis syndrome.
- 35. The method according to any of claims 31, 32, and 33, in which the indirect cause is severe nonthoracic trauma.
- 36. The method according to any of claims 31, 32, and 33, in which the indirect cause is hypertransfusion during emergency resuscitation.
- 37. The method according to any of claims 31, 32, and 33, in which the indirect cause is an artificial cardiopulmonary bypass surgery.
- 38. The method according to any of claims 31 through 37, in which the anti-IL-8 antibody is a monoclonal antibody.
- 39. The method according to any of claims 31 through 38, in which the anti-IL-8 antibody is an antibody against mammalian IL-8.

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40. The method according to any of claims 31 through 39, in which the anti-IL-8 antibody is an antibody against human IL-8.

41. The method according to any of claims 31 through 40, in which the anti-IL-8 antibody is WS-4 antibody.

42. The method according to any of claims 31

through 41, in which the anti-IL-8 antibody has the constant region of human antibody.

43. The method according to any of claims 31-through 42; in which the anti-IL-8 antibody is a humanized or chimeric antibody.

44. The method according to any of claims 31 through 43, in which the anti-IL-8 antibody is a humanized WS-4 antibody.

45. Use of anti-IL-8 antibody for production of a therapeutic agent for hypoxemia in acute lung injury resulting from indirect causes.

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